

DAYSRING ACADEMY REQUEST FOR SCHOOL RECORDS

Name of School Attended:

School Address:

City: _____ Zip: _____ County: _____

Please send all school records for the following student(s) currently enrolled in DaySpring Academy. We need all cumulative records, testing, immunization cards, and any other pertinent information so that we can assess student ability and grade placement. Please include any other information that will verify subject content and proof of educational goals being met for grades given.

Student Name	Grade

Administrator Signature

Date

Please send records to:

DaySpring Academy
1302 Madison Park Dr, Madison, AL 35758
Email: Admin@dsacademy.org

We do hereby authorize DaySpring Academy to receive all school records on the students listed above. We hold both schools blameless for any problems that may arise from the transaction of this request.

Parent/Guardian Signature

Date